

# APPLICATION FOR EMPLOYMENT

CITY OF ST. LOUIS TREASURER'S OFFICE  
133 SOUTH 11th STREET—SUITE 240  
ST. LOUIS, MISSOURI 63102

Position \_\_\_\_\_

Location/Department \_\_\_\_\_

Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

City of St. Louis Treasurer's Office is an Equal Opportunity Employer.

We consider applicants without regard to race, color, religion, sex, national origin, age, disability, veteran status, or any other legally prohibited status.

In accordance with the Immigration Reform and Control Act of 1986, employment is conditioned upon satisfactory proof of identity and legal ability to work in the United States.

## PERSONAL INFORMATION

Full Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
LAST FIRST M.I.

Street Address \_\_\_\_\_  
NO. & STREET CITY STATE ZIP CODE

Telephone No. \_\_\_\_\_ Soc. Sec. No. \_\_\_\_/\_\_\_\_/\_\_\_\_  
AREA CODE NUMBER

Have you been employed by the Treasurer's Office before? \_\_\_\_ No \_\_\_\_ Yes \_\_\_\_\_  
DATES

Do any of your relatives work for the Treasurer's Office? \_\_\_\_ No \_\_\_\_ Yes \_\_\_\_\_  
RELATIONSHIP

Are you 18 years of age? \_\_\_\_ No \_\_\_\_ Yes

Can you provide documentation of eligibility to work in the United States? \_\_\_\_ No \_\_\_\_ Yes

Days and Hours Available to Work: \_\_\_\_\_

Nights? \_\_\_\_ No \_\_\_\_ Yes Weekends? \_\_\_\_ No \_\_\_\_ Yes Call In? \_\_\_\_ No \_\_\_\_ Yes

## EMPLOYMENT HISTORY

List below present and past employers over the last ten years, starting with your most recent employer. Provide as complete information as possible. Previous employers will be contacted for references.

Employer _____ Address _____ City _____ State ____ Zip ____ Telephone No. _____ Dates: From _____ To _____ Reason for Leaving _____	Immediate Supervisor _____ Position and Duties: _____     
Employer _____ Address _____ City _____ State ____ Zip ____ Telephone No. _____ Dates: From _____ To _____ Reason for Leaving _____	Immediate Supervisor _____ Position and Duties: _____     
Employer _____ Address _____ City _____ State ____ Zip ____ Telephone No. _____ Dates: From _____ To _____ Reason for Leaving _____	Immediate Supervisor _____ Position and Duties: _____     
Employer _____ Address _____ City _____ State ____ Zip ____ Telephone No. _____ Dates: From _____ To _____ Reason for Leaving _____	Immediate Supervisor _____ Position and Duties: _____     

## EDUCATION

List below all formal education, training, and special certification classes you have attended.

High School \_\_\_\_\_ Diploma \_\_\_ No \_\_\_ Yes

Address \_\_\_\_\_ Course of Study \_\_\_\_\_

College \_\_\_\_\_ Total Yrs. Of Study \_\_\_\_\_

Address \_\_\_\_\_ Major \_\_\_\_\_ Degree \_\_\_\_\_

Graduate School \_\_\_\_\_ Total Yrs. Of Study \_\_\_\_\_

Address \_\_\_\_\_ Major \_\_\_\_\_ Degree \_\_\_\_\_

List any additional training, education, seminars, certifications, or other special skills which may qualify you for this position: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List any additional employment that may qualify you for this position: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you ever pleaded guilty to, or been convicted of a felony? \_\_\_ No \_\_\_ Yes

If Yes, please explain below the circumstances of the conviction, including the date, nature, place of the offense, disposition, and other information you may want to bring to our attention. Please note that conviction of a felony will not necessarily exclude you from consideration for a position with the City of St. Louis Treasurer's Office.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## CERTIFICATION AND ACKNOWLEDGEMENT

I certify that all of the information I have provided in this Application for Employment is true and accurate. I understand that if any of this information is found, at a later date, to be false, misleading, or inaccurate, I may be disqualified from consideration for employment or, if hired, I may be subject to immediate discharge. I hereby authorize the Treasurer's Office to verify these statements with the persons and organizations I have listed in this Application, and any personal references if requested by the Treasurer's Office.

Applicant Signature \_\_\_\_\_